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## \*BIBDATASHEET\*

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Bib Data Sheet

|                             |                                       |              |                        |                                    |
|-----------------------------|---------------------------------------|--------------|------------------------|------------------------------------|
| SERIAL NUMBER<br>10/601,750 | FILING DATE<br>06/23/2003<br><br>RULE | CLASS<br>219 | GROUP ART UNIT<br>1725 | ATTORNEY<br>DOCKET NO.<br>GTI-1507 |
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APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\*  
GSE - None

\*\* FOREIGN APPLICATIONS \*\*\*\*\*  
GSE - None

IF REQUIRED, FOREIGN FILING LICENSE GRANTED  
\*\* 08/18/2003

|   |                           |                        |                       |                            |
|---|---------------------------|------------------------|-----------------------|----------------------------|
| Foreign Priority claimed<br><input type="checkbox"/> yes <input checked="" type="checkbox"/> no   | STATE OR<br>COUNTRY<br>IL | SHEETS<br>DRAWING<br>4 | TOTAL<br>CLAIMS<br>15 | INDEPENDENT<br>CLAIMS<br>1 |
| 35 USC 119 (a-d) conditions met<br><input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after allowance |                           |                        |                       |                            |
| Verified and Acknowledged<br>Examiner's Signature: <i>Jeffrey L. Evans</i> Initials: <i>GSE</i>   |                           |                        |                       |                            |

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TITLE  
 Fiber optics laser perforation tool

|                                   |   |  |
|-----------------------------------|---|--|
| FILING FEE<br><br>RECEIVED<br>750 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____ |
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